

ISSUE FEE TRANSMITTAL

U.S. Department of Commerce  
Patent and Trademark Office

This form is provided in lieu of a formal transmittal and should be used for transmitting the Issue Fee. Sections 1A through 4 must be completed as appropriate.

MAILING INSTRUCTIONS

All further correspondence including the Issue Fee Receipt the Patent, and advanced orders will be mailed to the addressee entered in section 1 on PTOL-85c, unless you direct otherwise by specifying the appropriate name and address in 1A below. (Note: See box 5 below for correspondence concerning maintenance fee payments.)

INVENTOR(S) ADDRESS CHANGE SC/SERIAL NO

INVENTOR(S) NAME  
Street Address  
City, State and ZIP Code  
CO-INVENTOR(S) NAME  
Street Address  
City, State and ZIP Code

2A. The COMMISSIONER OF PATENTS AND TRADE-MARKS is requested to apply the Issue Fee to the application identified below.

(Signature of party in interest of record) (Date)  
12-15-88

Note: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

☐ Check if additional changes are on reverse side

SC/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
07/0587-17	06/07/87	014	0587-014-1	12/15/88
First Named Applicant	HERTEL			

TITLE OF INVENTION  
DEFLUORO ANTIVIRALS AND INTERMEDIATE THEREFOR

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
A-5/070	014-015-000	1002	UTILITY	NO	\$560.00	01/12/89

1A. Further correspondence to be mailed to the following:

Eli Lilly and Company  
Attention: Patent Division  
Lilly Corporate Center  
Indianapolis, Indiana 46285

2B. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will printed.

1. Joseph A. Jones  
2. Leroy Whitaker  
3.

P 30477 12/21/88 058219  
P 30478 12/21/88 058219

DO NOT USE THIS SPACE

05-0830 030 142 560.00CH  
05-0830 030 501 22.50CH

3. ASSIGNMENT DATA (print or type)

A. (1) ☐ This application is NOT assigned.  
(2) ☒ Assignment previously submitted to the Patent and Trademark Office.  
(3) ☐ Assignment submitted herewith.

B. For Printing On The Patent: (Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data below is only appropriate when an assignment has been previously submitted to the PTO or is submitted herewith. Completion of this form is NOT a substitute for filing of an assignment as required by 37 C.F.R. 1.334).

(1) NAME OF ASSIGNEE:

Eli Lilly and Company

(2) ADDRESS: (City & State or Country)

Indianapolis, Indiana 46285

(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION:

Indiana

4. The following fees are enclosed:

☐ Issue fee ☐ Advanced order ☐ Assignment recording

The following fees should be charged to deposit acc. no. 05-0830

(PTOL-85c or additional copy of PTOL-85b must be enclosed)

☐ Issue fee ☐ Assignment recording  
☒ Advanced order ☐ Any additional fees due

X Number of advanced order copies requested. (must be for 10 or more copies)

5. All correspondence relating to maintenance fees will be addressed to the correspondence address unless a separate "Fee Address" is provided to the Patent and Trademark Office (37 C.F.R. 1.363). A "Fee Address" may be submitted by the owner of record with the payment of the issue fee or thereafter by using form PTO-1537.

TRANSMIT THIS FORM WITH FEE



JOSEPH A. JONES  
ELI LILLY AND COMPANY  
PATENT DIVISION  
LILLY CORPORATE CENTER  
INDIANAPOLIS, IN 46285

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(Signature of party in interest of record)

(Date)

12-15-88

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SC/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
05-0830	05-07-80	12	1000	12-15-88
First Named Applicant: ELI LILLY AND COMPANY				

TITLE OF INVENTION: IMPROVED HYPERTENSIVE AND ANTIHYPERTENSIVE THERAPY

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
05-0830	1-1-1000	100	1000	1000	1000	12-15-88

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Eli Lilly and Company

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Indianapolis, Indiana 46285

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(PTOL-85c or additional copy of PTOL-85b must be enclosed)

☒ Issue fee  
☒ Advanced order  
☐ Assignment recording  
☐ Any additional fees due

Number of advanced order copies requested. 15

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TRANSMIT THIS FORM WITH PTOL-85b WHEN AUTHORIZING USE OF A DEPOSIT ACCOUNT